



STATE OF MICHIGAN
DEPARTMENT OF EDUCATION
LANSING

RICK SNYDER
GOVERNOR

MICHAEL P. FLANAGAN
SUPERINTENDENT OF
PUBLIC INSTRUCTION

June 27, 2011

MEMORANDUM

TO: Superintendents and Principals of Title I Elementary and Middle Schools, Alternative Schools and High Schools Identified for School Improvement, Corrective Action, or Restructuring

FROM: Linda Forward, Director *Linda Forward*
Office of Education Improvement & Innovation

SUBJECT: Required Documentation Submission due July 25, 2011

The *Elementary and Secondary Education Act (ESEA)*, as amended by the *No Child Left Behind Act of 2001 (NCLB)*, requires Title I schools identified for improvement, corrective action, or restructuring to disseminate the following specific information to the school community annually:

- ♦ **Report of AYP Status/Identification Notification** – A letter sent to all parents before the first day of school identifying the school's Adequate Yearly Progress (AYP) status, which is typically combined with Choice/Transfer notification (see next bullet) into one letter,
- ♦ **Choice/Transfer Letter of Notification** – A letter and supporting materials sent to all parents no later than 14 days before the first day of school explaining their right to transfer their child (may be combined with the AYP status/identification letter, as indicated above); the Michigan Department of Education (MDE) has determined this must occur no later than August 15,
- ♦ **Supplemental Educational Services (SES) Letter of Notification** (*not required for schools in the first year of identification for improvement; schools in the second year of identification for improvement or schools that are identified for corrective action or restructuring are required to send this notification*) – A letter and supporting materials sent to the parents of all students eligible for SES.

The status of elementary and middle schools, alternative schools and high schools identified for improvement, corrective action, or restructuring in your district is based on the preliminary release of AYP. Districts may choose to appeal the preliminary AYP findings. However, identified schools must still engage in the requirements associated with not making AYP for the duration of the appeal process. This includes the creation

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of the parental notification documents described above. Please visit the AYP secure site at <https://oeaa.state.mi.us/ayp/login.asp> for the preliminary AYP status of schools in your district.

The MDE is charged with the responsibility of reviewing these documents to ensure that they contain all of the legislatively-required elements. The MDE recognizes that these letters have posed a challenge to many districts due to the complexity of the essential components. For this reason, the MDE is providing early 2011-12 technical assistance to districts to ensure that districts are equipped to send approvable letters prior to the start of the school year.

By July 25, 2011, your district must submit template letters for each of the applicable categories listed above to the MDE via e-mail, at mde-ses@michigan.gov. Districts that completed this requirement in previous years need only to update prior year documents to reflect the current year AYP and SES information. The MDE will review each letter and provide feedback via e-mail. These letters can be templates with sample school information filled in, but should accurately represent all required district information, state information, SES information, contact information, and any other general information that will apply to each building that is currently available. The MDE acknowledges that some information is not available at the current time, and it is perfectly acceptable to indicate this in your template with language such as "specific school information will be added when released by the Michigan Department of Education."

A checklist and sample/template letters are attached to this correspondence. All template letters will need to be approved before the MDE can release school improvement grant funds. To reiterate, template letters are intended for and will be approved by the MDE for district-wide use, and when information specific to individual buildings becomes available, it must be filled in prior to sending to parents.

Districts will be contacted by individual reviewers shortly after the MDE receives the required documents. The MDE reviewers will provide feedback on and final approval of your documents. Approved parental notification documents will eventually be uploaded into the Michigan Electronic Grants System (MEGS) as evidence of compliance with the legislative requirements for Title I schools identified for improvement, corrective action, or restructuring. A future communication will be sent notifying districts that MEGS is ready to accept the upload of these documents.

Thank you for your prompt attention to these requirements. If you have questions about this communication or need more information about submitting your required documentation, please feel free to contact Greg Olszta at mde-ses@michigan.gov or 517-241-4715.

Identification and Choice Letter Requirements

- ☐ Letter explains what "identification for improvement" means.
- ☐ Letter includes a comparison of the school, in terms of academic achievement, to other schools in the district and the state.
- ☐ Letter explains the reasons for identification (be specific).
- ☐ Letter includes a description of what the school is doing to address the problem of low achievement.
- ☐ Letter includes a description of what the district or state is doing to help the school address the achievement problem.
- ☐ Letter includes information about how the parents can become involved in addressing the academic issues that caused the school to be identified for improvement.
- ☐ Letter includes specific details regarding the parents' right to transfer their student to another public school, including:
 - ☐ A list of available school(s) not identified for improvement (attach copy of list)
 - ☐ Notice that transportation will be provided subject to certain cost limitations
 - ☐ The academic achievement record of the school(s) to which the student may transfer
 - ☐ Other information to help parents decide which school(s) would be best for their student(s)
 - ☐ The explanation that SES may be available to eligible students remaining in the school.

Supplemental Educational Services Letter Requirements

- ☐ Letter identifies all approved providers for the district (list will be available in July 2011 at www.michigan.gov/mde-ses). Your template letter should include a placeholder for this information.
- ☐ Letter includes a brief description of the services, qualifications, and evidence of effectiveness of each provider. (This information will be available soon at www.michigan.gov/mde-ses for academic year 2011-12. Your template letter does not need to include this component, only a placeholder.)
- ☐ Letter includes a description of the procedures and timelines that parents must follow in selecting a provider.
- ☐ Letter informs parents on how the district will set priorities in order to determine which eligible students will receive services, if the district anticipates it will not have sufficient funds to serve all eligible students.

SAMPLE IDENTIFICATION/CHOICE LETTER

<Date>

<Parent>

<Address>

<City, State, Zip>

Dear <Parent>:

Your child is a student at <ABC School>. You know that your child is important to us and that we want to provide every opportunity for success.

Each school in Michigan is required to test students every year using the <Michigan Educational Assessment Program (MEAP) tests/Michigan Merit Exam (MME)>. The results of these tests, as well as participation on the tests <or graduation rate> are used to determine whether our school is making adequate yearly progress (AYP).

This year, <ABC School> is identified for improvement because <list reasons (be specific, e.g., only 20% of all students were proficient in English language arts and one of our subgroups demonstrated 40% proficiency in mathematics, both of which are below the required proficiency level in Michigan)>. A comparison of our test scores to other schools in the district and the state average can be found on the next page. In order to address this problem, <explain what the school is doing to address the problem and how the district or MDE are helping>. You can assist our efforts by <explain how parents can be involved in addressing the academic issues that caused the school to be identified>.

Since the school is identified for improvement, the district must offer you the opportunity to transfer your child to <specify other school(s) in this district or another neighboring school>. If the district receives more applications than can be accommodated, priority will be given to the lowest-achieving children from low-income families. You will be notified by mail of your child's transfer status.

To help you decide, we have provided test information from the schools that made AYP along with <ABC School's> information so you can compare them. Based on this information, you may choose a school using the enclosed transfer form. Transportation to this school will be provided. You must complete this form by <date – *at least 30 days*> and return it to <name and number> for consideration.

If you decide not to transfer your child and your child is eligible for free or reduced price meals, free tutoring may be available to your child. You will receive a separate letter about free tutoring.

To discuss this decision further, please call <name and number> and <he/she/they> will be happy to help you.

Sincerely,

School Official

Enclosures

SAMPLE IDENTIFICATION/CHOICE LETTER ATTACHMENT

<ABC School> Academic Achievement Comparison for Identified Areas

This chart compares <ABC School>'s academic achievement in the subject and grade identified for improvement to at least three other schools in the district and the state average.

<Sample numbers were used. Please delete these numbers and add the correct numbers for your district.>

	Percent of All Students Proficient in English Language Arts	Percent of Students in a Specific Subgroup Proficient in Mathematics	Percent of Students Proficient in <identified grade/subject>
<ABC School>	20%	40%	%
<Other School>	24%	54%	%
<Other School>	45%	27%	%
State Average	64%	72%	%
Required Proficiency Level	59%	65%	%

<ABC School> Transfer Information

Your student may be able to transfer to the following schools. Please complete the attached Transfer Request Form or contact <name> at <number> for more information.

<School Name>

<Academic Achievement Information>

<Other information that will help parents decide what choice would be best for their child(ren) (e.g., grades served, support services, extracurricular activities, application requirements.)>

<School Name>

<Academic Achievement Information>

<Other information that will help parents decide what choice would be best for their child(ren) (e.g., grades served, support services, extracurricular activities, application requirements.)>

<School Name>

<Academic Achievement Information>

<Other Information that will help parents decide what choice would be best for their child(ren) (e.g., grades served, support services, extracurricular activities, application requirements.)>

<Also include for review by the MDE your district's Transfer Request Form>

<District/PSA Name>

No Child Left Behind (NCLB) Public School Choice/Transfer Request

Please print all requested information accurately and clearly

Please complete one application per child. Check ONLY Option 1 or Option 2 below.

Return this request form on or before <date> to:

<school name>
<school office/contact person>
<street address>
<city/state/zip>
<phone number>
<fax>

Please complete the following student information:

Student Name: _____ Student ID#: _____

Student's Grade: _____ Student's Date of Birth: _____

Name of School Student Currently Attends: _____

Parent/Guardian Name: _____

Address: _____

Home Phone: (_____) _____ Alternate or Cell: (_____) _____

Is this student currently enrolled in special education? ☐ Yes ☐ No

Parent/Guardian Statement:

I have received and understand the notification sent informing me that <school name> did not make adequate yearly progress (AYP) and has been identified for improvement. I also understand that I have the option to transfer my child to another school that has not been identified for improvement and is making AYP. Based on this information, I choose:

☐ **OPTION 1:** Transfer to another school

First choice of school I wish to transfer my child to: _____

Second choice of school I wish to transfer my child to: _____

☐ **OPTION 2:** Remain at <school name> _____

Parent/Guardian Signature

Date

SAMPLE SES LETTER

<Date>

<Parent>

<Address>

<City, State, Zip>

Dear <Parent>:

Help your child succeed in school! As a result of the federal No Child Left Behind Act, your child may be able to receive extra help in the core academic subjects of mathematics, science, social studies, and reading/English. You can receive **free** tutoring because <ABC School> is identified for improvement and your family meets the income limits under the law.

<ABC School> is identified for improvement in <Mathematics and/or English Language Arts> because it has not made Adequate Yearly Progress on the <Michigan Educational Assessment Program (MEAP) test/Michigan Merit Exam (MME)> for <#> years <OR explain other cause, such as graduation rate>. The school is working to address these problems by <briefly identify improvement efforts>. In order to help your child do better in school, you can now choose a **free** tutoring program in your area. A list of programs that have been approved by the Michigan Department of Education is included. The programs will provide tutoring that is coordinated with what is being taught in school. Each program is different. You will need to review the information for each program and decide which is best for your child.

Think about the answers to these questions to help you decide:

- When and where will the tutoring take place?
- How far is it? *Please note that transportation to the tutor and to your home may not be provided.*
- How often the tutor will meet with your child and how long is each tutoring session?
- What programs, by grade level and subject areas, are provided by that tutor?
- What type of instruction is used (e.g., small group, one-on-one, or computer-based instruction)?
- What are the tutor's qualifications?
- Does this program seem to fit your child's needs?

The school has invited tutors to meet with parents <include details, time and place for a provider fair if applicable> to help you decide.

Included in this letter is a Tutor Selection Form. When you are ready to select a tutor from the list, complete this form and return it to <name and address> in the stamped envelope we have enclosed. Your Tutor Selection Form is due by <date – at least 30 days> for your child(ren) to be eligible to participate. It is important

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that you select a first, second, and third choice of providers due to limited availability.

If the district receives more applications than there is space available, students will be selected based on academic need. Students who demonstrate the greatest academic need will be offered services first. If your child is not selected to receive tutoring services, you will be notified by mail. If your child is selected to receive services, we will send a confirmation letter to you and the tutor you indicated on your Tutor Selection Form.

The No Child Left Behind Act also allows students to transfer to another school <be specific if it is in the district or if it is in a neighboring district>. The School Choice letter was mailed to you on <date>.

The school staff want to help you with this information, so please do not hesitate to contact us <name and number> with your questions.

Sincerely,

School Official
Enclosures

<Also include the tutor selection form (see next page) and a placeholder for your district's list of tutors as approved by the State. Tutor information will be available in July>

<District/PSA Name>
**No Child Left Behind (NCLB) Supplemental Educational Services
(Free Tutoring)**

Please print all requested information accurately and clearly

Tutor Selection Form

School Name: _____

Student Name: _____

Parent/Guardian Name: _____

Phone Number: _____

Please select from one of the following options:

☐ **YES**, I would like my student to receive free tutoring! I have selected the following providers:

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

☐ **NO**, I do not want my student to participate in the free tutoring program.

Please send the completed form to *<District Contact Name>* at *<District Contact Location>* no later than **<DATE>**. If you need help selecting a provider please contact *<District Representative>* at *<District Representative Phone>*.

Parent/Guardian Signature

Date